



News At Nine

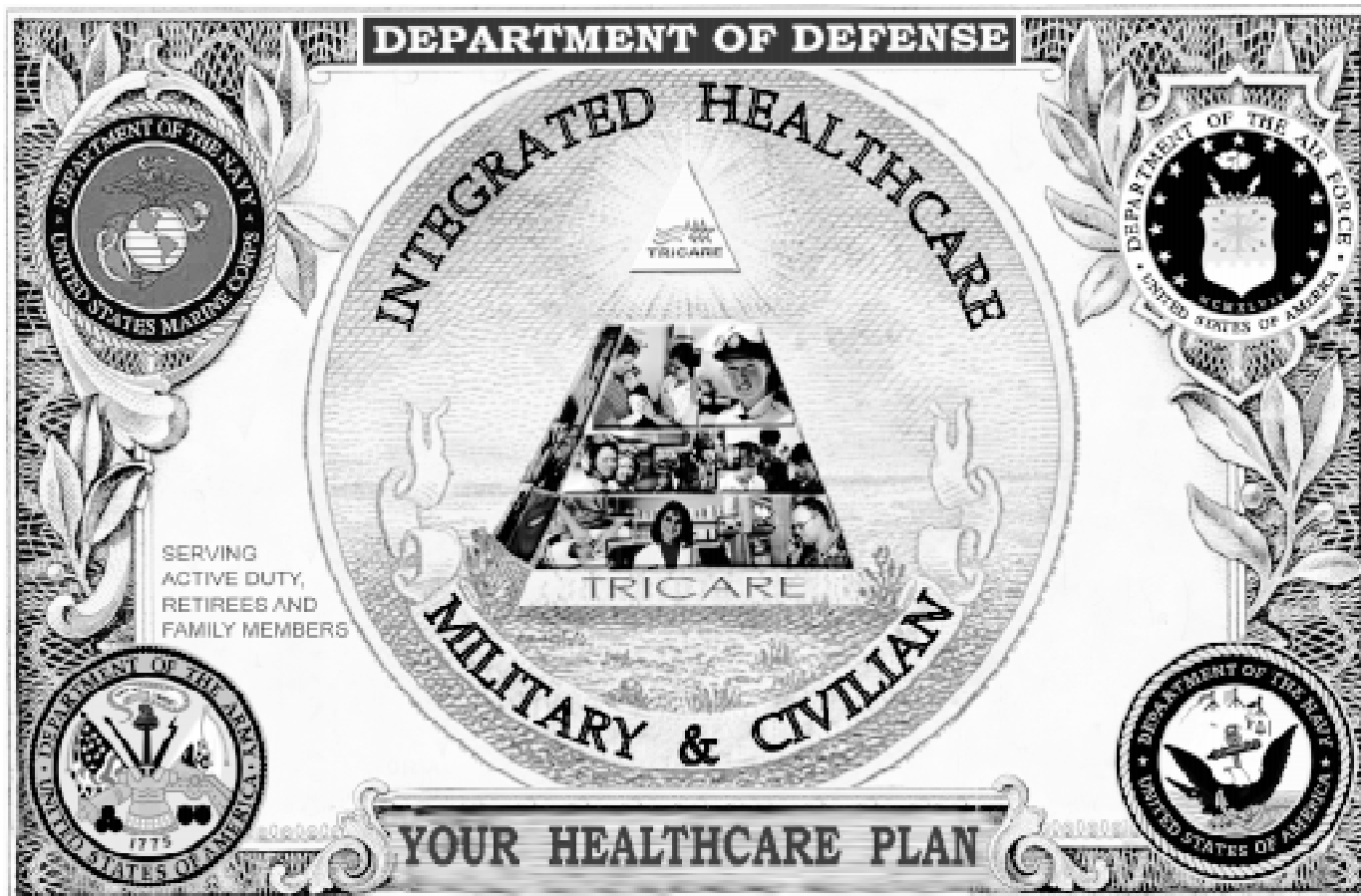
A 1998 Navy Chief of Information Merit Award Winning Publication



Spring 2000

TRICARE - Your Military Health Plan

Vol. 5 Issue 2



Mobilization Exercise Tests Healthcare Integration

By Lt. Bob Tatum, USN

If a major military conflict starts brewing somewhere in the world, many of our healthcare providers from Southern California military hospitals and clinics may be called out as part of the mobilization force. Medical personnel will be needed close to the action, ready to treat the casualties of war. But if so many of our healthcare providers will be deployed overseas, who will be left to care for both the active duty and family members still here at home?

Fortunately, TRICARE Region Nine has plans in place to keep healthcare running smoothly in Southern California. An agreement between TRICARE and Foundation Health Federal Services (FHFS) will allow civilian physicians and other healthcare specialists to replace military healthcare providers who are deployed during a major military mobilization. This backfill agreement is designed to minimize the impact of a military mobilization on the delivery of healthcare service to beneficiaries.

This backfill agreement was recently used during Exercise Bold Vision, which was designed to test the mobilization and backfill plans of each military Medical Treatment Facility (MTF) and assess FHFS's ability to adequately backfill vacant military positions with providers from their civilian healthcare network. The backfill agreement with FHFS is just one of the ways TRICARE keeps working smoothly in Southern California.

"This annual exercise allows us to make sure each of our MTFs has a working plan to mobilize a deploying force of healthcare specialists," said Navy Lt. Lorenzo Jones, the contingency coordinator for TRICARE in Southern California. "As the contingency coordinator, I am always looking for ways to keep TRICARE working in times of crisis. We are constantly reviewing our plans to make sure healthcare will remain available to our beneficiaries," Jones said.

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News At Nine is an official, quarterly publication of the Office of the Lead Agent, TRICARE Region Nine. Its purpose is to inform Region Nine military treatment facilities and support contractor staff about policies and items of interest regarding the TRICARE program. For submission guidelines, contact the PAO at (619) 532-5439 or DSN 522-5439.

From the Lead Agent

Rear Adm. Alberto Diaz, Jr., MC, USN

INTEGRATING MILITARY AND CIVILIAN HEALTHCARE

The military and civilian healthcare systems have always been different. Each has its own specific needs, goals and culture. In the past, these two systems have been funded differently, managed differently and delivered differently. Some of these differences were by design, while others developed as each system proceeded along its own evolutionary path. While this diversity added strength to our country's overall healthcare capabilities, it also created confusion and frustration for military families who were trying to use both systems simultaneously. The merging of these two healthcare systems constitutes what we call TRICARE.

Our job, as TRICARE providers and administrators, is not to eliminate the differences that exist between military and civilian healthcare, but to make sure that the integration of these two systems is seamless to our TRICARE patients. Although our goal is to make this integration transparent to our patients, it does not mean it will be transparent to us — far from it.

Both the military and civilian healthcare systems change everyday. In the past, we have spent most of our time trying to solve yesterday's problems. Often by the time we identify a problem, determine a solu-

tion, and get legislation and funding through congress, we aren't even dealing with the same problem anymore.

As an example, when a patient is in ICU, nurses constantly track the patient's status, and make immediate adjustments to medication or treatment. Monitors record all vital signs and sound the alarm when necessary. Unfortunately, if TRICARE was the patient, its condition would only be checked every few months, with treatment following a year or two later.

We already have programs in place that help integrate military and civilian healthcare. Foundation Health Federal Services, our managed care support contractor partner, will support us with civilian providers to fill in for military physicians and nurses in the event of a large medical deployment. We recently tested this system with good results. An agreement with the County of San Diego incorporates the Federal Fire Department Emergency Medical Technician-Paramedics into the existing Countywide Emergency Medical Services. This agreement better protects the lives and health of our personnel and guests located within our installations in the San Diego metropolitan area. These programs are good, but we need to keep moving in the right direction.

Healthcare is changing so fast that our old ways of responding to static systems won't work anymore.



We must create an adaptable process that responds rapidly to the changing needs of our patients and the changing conditions of military and civilian healthcare. We already have standards for healthcare access and quality, but I am reluctant to set a standard for healthcare seamlessness, for fear that it may be seen as a limit.

As we constantly improve TRICARE through experience, customer service and better business practices, we must keep focused on building a self-monitoring system that quickly adapts to changing conditions. Only then can we keep TRICARE seamless for our patients.



TRICARE Outpatient Clinics Open in San Diego County

New TRICARE Outpatient Clinics (TOCs) in Clairemont Mesa and Chula Vista are now serving beneficiaries in San Diego County. Opened in December, this project was over two years in development, and entailed the transition from the former NAVCARE clinics. The facilities operate under a unique Resource Sharing agreement between Foundation Health Federal Services and Naval Medical Center, San Diego. With enrollment capacities of over 20,000 members at each site, the TOCs are expected to be major sources of primary care to the TRICARE population in San Diego.

Contractor's Corner

By Peter McLaughlin

As Foundation Health Federal Services approaches the beginning of our fifth year as the Managed Care Support Contractor, new creative enterprises and innovative efforts remain a constant theme in Region Nine. With this thought in mind, I would like to take this opportunity to share some of the important initiatives, which have occurred recently, as well as the progress we continue to make in other important, ongoing activities.

In October 1999, we received instructions to implement TRICARE Prime at China Lake, with a start up scheduled for April 1, 2000. The decision to bring the TRICARE Prime product to this relatively isolated location was enthusiastically received by our staff and the China Lake community. Intensive planning and preparations began immediately, and recently culminated in an on-site readiness review at China Lake on March 15.

During the readiness review, representatives from the TRICARE Management Activity (TMA), OLA, Naval Hospital Twentynine Palms, and Branch Medical Clinic China Lake met with FHFS members to evaluate our preparations and ensure that all of the necessary elements were in place to support the TRICARE Prime program at this location. Key areas reviewed included Service Area Operations, Provider Development and Network Adequacy, Provider Education, Resource Sharing / Resource Support, Marketing and Beneficiary Education, Health Care Services, and the Mental Health Network. Particular attention was given to the new Beneficiary Services Office now located within the Branch Medical Clinic at China Lake, which will include staffing by both a Health Care Finder and a Beneficiary Services Representative.

Following the review, feedback from the government officials was

extremely positive, reflecting the exhaustive efforts made by Candy Maynard, our Director of Health Care Services and Project Manager, and the entire China Lake TRICARE Prime Implementation Team. We now eagerly look forward to providing this community of beneficiaries with the same level of excellent service, which has been our hallmark throughout Region Nine.

As we embark upon the implementation of a full TRICARE program for China Lake, it may be appropriate to reflect on the Yuma start up. It was three years ago when Yuma was carved out of Region Seven and placed in Region Nine, and TRICARE was implemented. One of our staff members recently visited Yuma and made calls on the Base Commanders at Marine Corps Air Station and Yuma Proving Ground. Both Commanders expressed a high level of satisfaction with TRICARE and had no major issues.

FHFS' network requirements in Yuma are fulfilled primarily by the YUMA IPA which provides more than one hundred primary care and specialty providers. A visit with the IPA administrator also revealed a smooth working relationship and no issues. The IPA, along with the Branch Medical Clinics at MCAS and YPG, and Yuma Regional Medical Center provide a robust delivery system for our beneficiaries. There is no greater reward for all the hard work and effort than to see the system work for our beneficiaries.

Another exciting new initiative is the opening of the TRICARE Outpatient Clinics (TOCs) in Clairemont Mesa and Chula Vista. As "first of their kind" activities, both clinics opened on December 15, 1999, the end product of many months of cooperative efforts by the staff at OLA, Naval Medical Center San Diego (NMCS), and FHFS. The new clinics replace the former NAVCARE clinics and provide primary care services to TRICARE



Mr. Peter McLaughlin, vice president, Foundation Health Federal Services for Region Nine.

eligible beneficiaries in the San Diego area under a unique Resource Sharing agreement. The TOCs, while part of the family of branch medical clinics belonging to Naval Medical Center San Diego (NMCS), are staffed by our sub-contractor, Spectrum Healthcare Resources, and are particularly well-positioned to serve TRICARE beneficiaries residing in the San Diego and South Bay areas.

As an immediate reflection of this project's success, we have already seen a substantial increase in the number of Prime enrollees who have selected these clinics as their preferred source of primary care. The combined enrollment at the Chula Vista and Clairemont Mesa TOCs increased by over 2,400 members during the first two months of operations. As many of the primary care manager (PCM) sites at NMCS have already reached or are fast approaching their maximum capacities, the TOCs offer exceptional value in their ability to attract and

See Contractor's Corner, page 5

TRICARE_help@amedd.army.mil

What is TRICARE e-mail help?

TRICARE e-mail help is the Army's free service designed to get you quick answers to any TRICARE question. Whether you are looking for basic TRICARE information or have a more difficult issue involving TRICARE, there is one address where people are standing by to assist you.

Who will answer my mail?

You will receive an initial response from our professional administrative staff within one (1) business day. This initial response will let you know which TRICARE expert has been assigned to help answer your question. Our TRICARE experts work at Army hospitals, the TRICARE Management Agency, at our corporate headquarters (United States Army Medical Command/Office of the Army Surgeon General), and for the Assistant Secretary of Defense for Health Affairs.

If it has to do with TRICARE, we have the people who can answer your question. No matter what part of TRICARE your e-mail pertains to, we will keep your personal information confidential.

When will I receive a reply?

Once your inquiry reaches one of our experts, we will get you an answer fast! In some cases, our

expert can resolve your issue the same day. With more difficult issues, you can expect at least a preliminary response in a week.

Where can I use the help address?

Our e-mail address can be reached from any computer that is connected to the Internet. You can easily reach us at work, at home, or from anywhere else. It is perfectly acceptable to e-mail us from your Department of Defense computer at work.

How does the system work?

Our e-mail help system uses the speed and efficiency of the Internet to send your inquiry directly to our TRICARE e-mail Help staff center. Once it arrives there, our professional administrative staff consults their list of TRICARE experts and forwards your mail to the expert who is responsible for your concern. We track each and every piece of mail to make sure all mail is answered quickly and professionally.

Our experts respond directly to you! If you have additional questions or need more help, they are only a click away. Each inquiry and response is filed so that you can always write to us again and ask for more help on the same issue.

Contractor's Corner

continued from page 4

retain enrollees within the MTF. FHFS has committed itself to ensuring the success of this venture, while further enabling the optimization of MTFs within the military health care system.

Finally, I am extremely proud to report on the continuing progress of the TRICARE Senior Prime demonstration program in San Diego. This has become one of the most gratifying experiences we have experienced during the past four years, as we have helped in "keeping the promise" to military retirees and their spouses when they become eligible for Medicare. The demonstration, which began at NMCS D in November 1998, has set an enviable standard for

quality care and service to this special group of beneficiaries. As of March 1, a total of 3,856 members have enrolled in the program, against an open enrollment capacity of 4,000. An additional 445 beneficiaries have "aged in" to this program, moving directly from a TRICARE Prime status to TSP upon turning 65 years of age.

Our support of the TSP demonstration program has further strengthened the substantial partnership between FHFS, OLA and the MTFs; a partnership which is frequently cited and credited as responsible for the success of the TRICARE program in Southern California. And, while we recognize that opportunities for improvement require our continuing vigilance, we remain optimistic in our ability to meet those challenges through our mutually supportive efforts.

Naval Hospital Twentynine Palms Renamed

*By Dan Barber, Public Affairs Officer
Naval Hospital Twentynine Palms*

NAVAL HOSPITAL TWENTYNINE PALMS, Calif. – Naval Hospital Twentynine Palms marked another milestone in its history May 2, at a rededication ceremony, changing the hospital's name to the Robert E. Bush Naval Hospital.

Naming the hospital after Bush, a recipient of the Medal of Honor, allows the Hospital Corps and the Navy to honor one of its own.

At this ceremony a bronze statue depicting the actions of Bush was unveiled in a permanent location at the front of the hospital. This statue is a full-size duplicate of a statue that was erected in Bush's hometown. The guest speaker for this event was Admiral Jay Johnson, the Chief of Naval Operations. Also, Vice Admiral Richard Nelson, Surgeon General of the Navy and several other Navy, Marine Corps and civilian VIPs were invited to participate in or witness this ceremony.

52 years ago, as a Hospital Apprentice First Class, Bush, then an 18-year-old medical corpsman, was on patrol with a Marine rifle company on Okinawa. Though seriously wounded, receiving grenade wounds to the back, stomach and arm and losing one eye, Bush continued to provide medical aide. For this unselfish service, Bush received the Medal of Honor from President Harry S. Truman, following the war. A copy of this citation and a photograph of Bush receiving the Medal have been on display in this hospital since it opened its doors in July 1993.

His citation reads, "For conspicuous gallantry and intrepidity at the risk of his life above and beyond the call of duty while serving as a Medical Corpsman with a rifle company, in action against enemy Japanese forces on Okinawa Jima, Ryukyu Islands, 1 May 1945. Fearlessly braving the fury of artillery, mortar, and machine gun fire from strongly entrenched hostile positions, Bush constantly and unhesitatingly moved from one casualty to another to attend the wounded falling under the enemy's murderous barrages. As the attack passed over a ridge top, Bush was advancing to administer blood plasma to a Marine officer lying wounded on the skyline when the Japanese launched a savage counterattack. In this perilously exposed position, he



resolutely maintained the flow of life-giving plasma. With the bottle held high in one hand, Bush drew his pistol with the other and fired into the enemy's ranks until his ammunition was expended. Quickly seizing a discarded carbine, he trained his fire on the Japanese charging pointblank over the hill, accounting for six of the enemy despite his own serious wounds and the loss of one eye suffered during his desperate battle in defense of the helpless man. With the hostile force finally routed, he calmly disregarded his own critical condition to complete his mission, valiantly refusing medical treatment for himself until his officer patient had been evacuated, and collapsing only after attempting to walk to the battle aid station. His daring initiative, great personal valor, and heroic spirit of self-sacrifice in service of others reflect great credit upon himself and enhance the finest traditions of the U.S. Naval service."

Bush spends the winter months in Indio, Calif., which, is part of this hospital's area of responsibility, and during the summer lives in his hometown of Southbend, Wash.

Mr. Bush, born in Tacoma, Washington, in October 1926, enlisted in the United States Navy in 1944 as a Hospital Corpsman.

During his service with the Navy, Mr. Bush served at the Naval Hospital in Seattle, Washington; U.S. Naval Training Station and Hospital Corps School in Farragut, Idaho; Fleet Marine Force Pacific, Camp Pendleton, California; Company G, Second Battalion, Fifth Marine Regiment, First Marine Division. He participated in the invasion of Okinawa where he performed his heroic deeds.

After leaving the Navy, Mr. Bush returned to high school and received his diploma, then studied business administration and founded the Bayview Lumber Company at South Bend, Washington in 1951, still serving as its president.

Mr. Bush is a member of a variety of service and social organizations and a Life Member of the First Marine Division Association. He is also a member, and Past-President, of the Congressional Medal of Honor Society.

Twentynine Palms Technician Receives Prestigious Award

*By Dan Barber, Public Affairs Officer
Naval Hospital Twentynine Palms*

NAVAL HOSPITAL TWENTYNINE PALMS, Calif. – Naval Hospital Twentynine Palms has been blessed with having a very talented and knowledgeable computer technician assigned to its Management Information Department since 1997.

That fact was recently verified at the 2000 Dooling Awards ceremony held in Dallas when Petty Officer 3rd Class Roberto Carbajal, a New York, New York native, was selected as this year's Dooling Award recipient for the Navy's Medical Department.

The Dooling Award recognizes individuals who represent the best of the best in the Navy's Information Management field.

What marks Carbajal's accomplishment besides being named as the best, is the fact that he is a Hospital Corpsman and was competing against higher-ranking individuals who are in computer specialty ratings. "We all know that Hospital Corpsmen are highly skilled, intelligent individuals who are capable of great things," said Capt. Joan M. Huber, commanding officer, Naval Hospital Twentynine Palms, Calif. "We witness this everyday here in Twentynine Palms," she said. "Whenever one of our computers break down the first person we request help from is Petty Officer Carbajal," she added. "Carbajal has been an integral part of our Management Information Department since his arrival. In addition to helping staff keep their computers up and running, he was an important part of the Y2K team who led this hospital through a trouble free transition from 1999 to 2000, and is very deserving of this honor" said Huber.

Carbajal's citation from Rear Admiral S. T. Fisher, Deputy Chief, Bureau of Medicine and Surgery, reads in part: "Your selection as the Navy Medical Department's Enlisted Information Manager of the Year is a testament to your superior performance and contributions to the military health care team. It, therefore, gives me great pleasure to commend you for your outstanding professionalism and commitment to

excellence. As a Management Information Systems Technician at Naval Hospital, Twentynine Palms, California, your numerous individual accomplishments have been substantial and will have a positive impact on your command and Navy Medicine. These accomplishments include, but are not limited to: providing pivotal support of local Year 2000 preparation

and operations; acquiring and installing a remote access server to access on-line information for staff members while on temporary additional duty or away from their home; identifying the need for additional laptop training and developing the training course; expanding the command network from 30 stand-alone personal computers to more than 300 centrally managed networked personal computers; and developing a Management Information System Intranet page that allows personal computer technicians to instantly access on-line help in the deployment of new systems. Your demonstrated leadership and technical expertise were also instrumental in the implementation of innovative methods, procedures and solutions for installing personal computers, peripherals, a wide array of other desktop applications, and support of

network boards, cabling, and all other peripheral devices required to "standup" an operational network."

Carbajal entered the Navy in May 1995. He graduated from George Washington High School in June 1994 then attended Borough Community College until just before joining the Navy. Following bootcamp, Carbajal attended Hospital Corps School in San Diego, Calif., graduating in August 1995. He then attended follow-on training at the Field Medical Service School at Camp Pendleton, Calif. Carbajal reported for duty at Naval Hospital Twentynine Palms in December 1995, and was assigned to the Management Information Department two years later in 1997.

Besides computers, Carbajal's other interests include, reading, martial arts and dancing.



TRICARE Information and Health Care Finder (800) 242-6788

The toll free telephone number listed above is available to you when you need information about TRICARE or have a question about your coverage. When you call (800) 242-6788, you will have several options to choose from:

- Speak with a Health Care Finder for assistance obtaining a referral
- Speak with a claims processor with a question about a claim or bill
- Speak with a marketing representative to request program materials
- Speak with a Beneficiary Services Representative with questions about your benefits.

After you have made your selection, listen carefully as you may be given other options to choose from to make sure you reach the correct person.

HEALTH CARE INFORMATION LINE (HCIL) (800) 611-2883

The Health Care Information Line (HCIL) is a free, 24 hour phone service for TRICARE beneficiaries in California, Hawaii, and Yuma County, that can help you with any health questions – just dial **1-800-611-2883**.

When you call the Health Care Information Line, you can speak to a nurse or listen to the audio health library which offers fast, easy access to more than 500 recorded health topics.

HCIL nurses are there to help you when you need to make a health decision, when you can't decide whether or not to call the doctor, or when you need a home remedy to make you feel better. You can call any time, day or night, seven days a week. Remember, if an HCIL nurse advises you to seek urgent care, TRICARE Prime members must call your Primary Care Manager first to arrange for a referral through the Health Care Finder. Advice from the HCIL nurse to seek care is not authorization for care. You may also use the audio health library to access health information, for tips on how to stay healthy, for answers to your health problems and learn how to take care of minor problems at home.

For a complete list of audio health topics, call the TRICARE Service Center nearest you: 1-800-242-6788.

TRICARE SERVICE CENTERS AND BENEFICIARY SERVICE OFFICES (800) 242-6788

TRICARE Service Centers (TSC) and Beneficiary Service Offices (BSO) are conveniently located at or near your Military Treatment Facility (MTF). The TSCs and BSOs are staffed by Beneficiary Services Representatives to assist you with your healthcare needs. All TSCs and BSOs can be reached through one convenient number: (800) 242-6788

New TRICARE Service Center At Vandenberg AFB

On 16 February 2000, the TRICARE Service Center at Vandenberg AFB opened their doors for business inside of the Military Treatment Facility. The combining of the Health Benefits Office and the TRICARE Service Center under one roof offers one stop shopping for our customers. The beneficiaries and staff are delighted.



Above right: Andrea Fields, TRICARE center supervisor, holds a ribbon in front of Vandenberg's new TRICARE Service Center. Col. Alan Newton (center), 30th Medical Group commander, and Col. Charles Phillips, 30th Space Wing vice commander, cut the ribbon to officially mark the opening of the new facility on the first floor of the 30th MDG Clinic.

Vandenberg Receives Award For Healthcare Access

*By Tech. Sgt. Lloyd C. Conley
30th Space Wing Public Affairs*

The 30th Medical Group was recently awarded the Health Access to Care Award in competition among Department of Defense military medical treatment facilities worldwide.

The award recognized the Vandenberg medical treatment facility for meeting and exceeding all health care access standards.

Col. Alan Newton, 30th Medical Group commander, accepted the award at the Defense Department's TRICARE conference in Washington D.C. last month. The vast majority of TRICARE awards went to Air Force facilities, Newton said. "That fact clearly emphasizes the Air Force commitment to provide easy access to excellent health care," he said.

"I am very proud of the technicians and medics who made this award possible," he added. "They are the ones who make the system work."

Newton said the award recognizes the dedication of the 30th Medical Group to take care of service members and their families by developing systems to facilitate access to medical care for them.

"The bottom line is that when a service member or a member of his family needs a medical appointment, the Vandenberg military treatment facility is able to provide access to a health care provider in a reasonable and timely manner," Newton said. The provider can be either on base or in the local community.

A new telephone answering system was installed in January to improve the medical appointment process and cut down on patient's waiting time. The system also provides a health care professional to offer advice and information to customers



Members of the 30th Medical Group put service before self to win the DoD Access to Care Award.

and patients over the phone during normal and off-duty hours.

"The new system is an effective management tool that allows us to be more responsive to patient needs," said Tech. Sgt. Earl Mook, 30th Medical Support Squadron NCOIC of the Business Operations Flight. The "stacker" phone system allows medical personnel to actually see how many patients are calling, whether or not they're on hold and the length of time they've been

on hold. During heavy-volume periods, additional people can pitch in to help with the appointment, he added.

The primary purpose of Vandenberg's system is to schedule and provide for urgent patient needs the same day, routine needs within seven days and special needs within 30 days. The arrangement and prioritization of scheduling medical appointments in this manner helps to ensure patient access to quality health care, Newton said.

"The program provides positive feedback," said Lt. Col. Scott Dawson, 30th Medical Support Squadron commander. Medics are able to get a better idea of patient needs and how well the system is working.

It is important to point out that there is still work to be done, Dawson said. The medical squadron's processes are consistently evaluated for areas of continuous improvement in order to better serve members and their families.

The awards, recognition and innovative systems are examples of the 30th Medical Group's dedication to providing quality health care for the community; but the real winners are the patients, Newton said. "That is evident in the compliments I receive on our health care system on a daily basis," Newton said. "The recent opening of the TRICARE service center in the clinic is another example of our continuing commitment to provide outstanding service to our patients."

TRICARE Information Available

By Capt. John Savage, USAF, MSC

Is there anywhere TRICARE is explained simply? Actually, the answer is yes. There are a number of printed materials available which describe the TRICARE program. Best of all there are materials specifically developed to meet the needs of every information seeker.

Are you a Marine looking for information on the TRICARE program? A retiree interested in the telephone Health Care Information Line (HCIL)? or someone looking for a simple review of the TRICARE program? Booklets and pamphlets describing the TRICARE program are yours for the asking.

Materials describing the TRICARE program are available at your nearest TRICARE Service Center, Beneficiary Service Office, or military hospital or clinic. To learn where the nearest office is to you, call (800) 242-6788 or check out the following web pages: www.reg9.med.navy.mil and www.FHFS.com.

There are a wide array of available materials developed by Foundation Health Federal Systems, the military's partner in delivering the TRICARE health care benefit in California. Other materials are produced for the military health system by the TRICARE Management Activity, DoD's TRICARE oversight organization.

Here is a sampling of available materials, and the information they provide for you:

- TRICARE Made Simple: a 16-page pamphlet, describing the basics of TRICARE.
- HCIL brochure: How to use the Health Care Information Line and talk to a nurse for health care advice 24 hours a day. Also, list of topics to listen to in the Audio Library. 3,000 topics ranging from a specific women's health topics to seven topics on various issues of diabetes.
- Sailing with TRICARE: A 24-page pocketsize overview written specifically for sailors.
- Navigating TRICARE: A 24-page pocketsize overview written specifically for marines.
- Retiring Soon: A must read for those who are retiring in the next year. It describes what you need to do when you retire to ensure you know your best options for health care once you retire from active duty.
- Maternity: If you are expecting, this simple tri-fold explains how to use your TRICARE benefits for you and your newborn.
- Remote Controller: a 36-page description of the program for active duty service members who both live and work more than 50 miles or 1 hour from a military clinic or hospital.

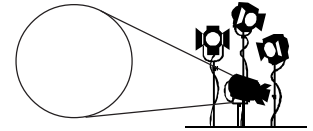
Check out what's available at your nearest TRICARE Service Center, Beneficiary Service Office, or military hospital or clinic. If your organization needs any of these booklets in large quantities, contact the Marketing and Education Officer for TRICARE Southern California at jpsavage@reg9.med.navy.mil, or (619) 532-5431.





WEED ARMY COMMUNITY HOSPITAL
"AN OASIS OF CARE"

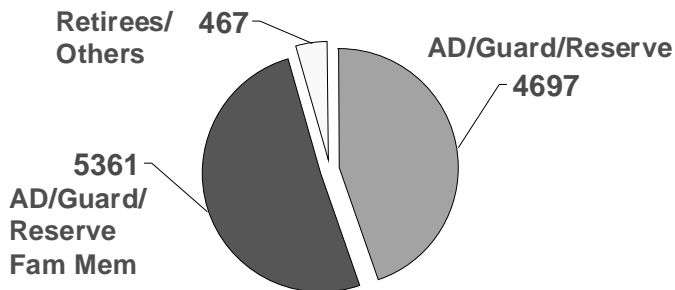
Weed Army Community Hospital, Ft. Irwin



MEDDAC MISSION

Provide world class managed health care and life quality improvement to the community of the National Training Center, Yuma Proving Grounds and our Military Health System with an uncompromising commitment to quality service while supporting the medical readiness of the Army through exemplary trained, equipped and qualified soldier medics.

FY 2000 Avg. Eligible Population



TRICARE Briefers Available

Need an expert to talk to your organization about TRICARE? Each Military Medical Treatment Facility and many branch medical clinics have experts available to brief your people about their TRICARE benefit. Call the location nearest you for more information.

Weed Army Community Hospital, Ft. Irwin	760-380-4876
Naval Hospital Twentynine Palms	760-830-2804
Naval Hospital Camp Pendleton	760-725-1291
95 th Medical Group, Edwards AFB	661-277-2614
61 st Medical Group, Los Angeles AFB	310-363-0261
30 th Medical Group, Vandenberg AFB	805-606-6785
Naval Medical Center San Diego	619-532-5849
Branch Medical Clinic Barstow	760-577-6575
Branch Medical Clinic Bridgeport	760-932-7761
Branch Medical Clinic Yuma	520-341-3177
Branch Medical Clinic Port Hueneme	805-982-6369
Branch Medical Clinic China Lake	760-939-8002



A Week in the Life of the Military Health System

Eligible Beneficiaries	8,300,000
TRICARE Prime Enrollees	3,300,000
Admissions	10,000
Outpatient Visits	898,000
Births	1,800
Dental Procedures	674,000
Claims Processed	519,000
Telephone Calls	368,000

Departmental Focus: Regional Operations

By Lt. Bob Tatum, USN

The Regional Operations Department, otherwise known as Reg Ops, is responsible for many aspects of TRICARE that keep it running smoothly in Southern California. Their long list of responsibilities include:

- Assisting military Medical Treatment Facilities (MTFs) with enrollment
- Preparing and approving all marketing and educational materials
- Ensuring medical and dental readiness for active duty members
- Administrating TRICARE Senior Prime
- Administrating TRICARE Prime Remote
- Coordinating beneficiary services
- Coordinating joint ventures with the Department of Veteran Affairs
- Coordinating emergency and contingency planning with all MTFs
- Evaluating the network's adequacy and its ability to meet access standards

Most of these activities are tied together, and require a broad understanding of how changes in one area can impact many other areas. For example, when ensuring the medical and dental readiness for active duty members in Southern California, those on TRICARE Prime Remote often need special consideration. This almost always involves evaluating our civilian network's adequacy in many remote locations. It also involves constantly monitoring enrollment at both the MTFs and within the civilian provider network, and identifying where more or less resources are needed.

Another big concern for Reg Ops is the ongoing initiative of educating beneficiaries about the TRICARE program and how to take advantage of all their benefits. This takes the coordinated efforts of TRICARE Region Nine Lead Agent, Foundation Health Federal Services (FHFS), each MTF, and in many cases, individual commands to get the word out to service members about their benefits. This coordination was put to the test over the past year while implementing TRICARE Prime Remote. Those military members living and working over 50 miles from an MTF were identified and contacted. Marketing materials for the program were developed and distributed. These remote service members and their units were then visited by FHFS and Reg Ops members and given face-to-face briefs on how to use the new program, and what the benefits might be to each service member, as well as to the unit as a whole.

Fortunately, because of the outstanding working relationships between the Lead Agent, MTFs and FHFS, these programs are running smoothly in Southern California. The goal is that once a member is enrolled in TRICARE, administrative procedures become transparent to the user, and healthcare between military and civilian providers remains seamless.



Front left to right: Dr. Sarah Simpkins, MAJ Michael Crandell, LT Lorenzo Jones, LCDR David Walton, Annette McGinty, Capt John Savage, LT Angelic Donovan, HM1 Jeff Jones, Jennifer Porter, DTC Julianne Kasmado, LTC Kevin Williams.